

West Virginia Ethics Commission

# Lobbyist Activity Report Form

2022-01

**RECEIVED**

By Ethics Commission at 11:05 am, May 16, 2022

210 Brooks St., Ste. 300  
Charleston, WV 25301  
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For office use only:  
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Days late \_\_\_\_\_ Fine \_\_\_\_\_

Late reporting fine - \$10 per business day past the due date (\$250 maximum)

### 1. Name and contact information

Name Gretchen Frankenberry

Phone 304-444-4695

Address 1860 Loudon Heights Road

Email gretchen@thrivecollaborativeinc.com

City, State Zip Charleston, WV 25314

### 2. Reporting period for which this activity report is being filed

Check	Report	Period	Due Date				
x	2022-1	1/1/22-4/30/22	5/16/22				

### 3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

1. TEAM for WV Children Inc.
2. WV Society for Respiratory Care
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

### 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

Lobbying activities included meeting and emailing with legislators, attending committee meetings, and providing educational resources to legislators. There were no expenditures.

### 5. Expenditures

If no expenditures, including campaign contributions, mark here:  \_\_\_\_\_

If you spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following categories per each employer you represent. Complete and attach Schedule A to this report.

Expenditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$

If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and attach a Schedule B for each event.

Continued on page 2